

Message Text

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ACTION NEA-12

INFO OCT-01 ISO-00 SNM-02 L-03 AID-20 CU-04 ABF-01 OPR-02

PER-05 A-01 MED-03 DODE-00 NSC-10 HEW-08 SS-15 INR-10

CIAE-00 RSC-01 DRC-01 /099 W
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R 071026Z SEP 73

FM AMEMBASSY ISLAMABAD

TO SECSTATE WASHDC 923

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E.O. 11652: N/A

TAGS: SNAR, PK

SUBJ: NARCOTICS TREATMENT

REF: STATE 158602

1. SUMMARY. FACILITIES EXIST IN KARACHI, LAHORE, PESHAWAR AND RAWALPINDI WHICH MIGHT ACCOMMODATE ADDICT TREATMENT CLINICS. SEVERAL PSYCHIATRISTS HAVE SOME EXPERIENCE THIS FIELD. MAJOR PROBLEM IS ABUSE OF INJECTIBLE PETHADINE AND MORPHINE BY YOUNG PEOPLE. PAK NARCOTICS CONTROL BOARD (PNCB) HAS BEEN SHOWING GREATER INTEREST IN TREATMENT QUESTION RECENTLY. HOWEVER, IT IS PREOCCUPIED WITH ENFORCEMENT AND POPPY ERADICATION ISSUES AND HAS AS YET NO TREATMENT AND REHABILITATION STAFF. FURTHERMORE THERE ARE NO RELIABLE DATA ON EXTENT OF DRUG ABUSE. EMBASSY RECOMMENDS THAT VISIT OF NIMH EXPERT BE DELAYED UNTIL PNCB HAS STAFF IN PLACE AND MORE DATA COLLECTED. END SUMMARY.

2. PNCB CHAIRMAN ORZKZAI IS NOW GIVING INCREASING ATTENTION TO QUESTION OF TREATMENT AND REHABILITATION OF ADDICTS IN WAKE OF RECENT DECISION IN PRINCIPLE TO ELIMINATE EXISTING OPIUM DISTRIBUTION SYSTEM (SEE ORAKZAI-SMITH MEMCON JULY 24). HE HAS ALSO ASKED US INFORMALLY ABOUT POSSIBLE US ASSISTANCE. HOWEVER, PNCB
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HAS BEEN PREOCCUPIED WITH PROBLEMS OF ENFORCEMENT AND

POPPY ERADICATION AND
HAS NOT YET APPOINTED OFFICER TO
FILL PROJECTED SLOT OF DEPUTY DIRECTOR FOR REHABILITATION.
GOP WOULD UNDOUBTEDLY WELCOME VISIT OF NIMH SPECIALIST
TO SURVEY NEEDS AND CAPABILITIES IN TREATMENT AND RE-
HABILITATION. ALMOST TOTAL LACK OF RELIEABLE DATA ABOUT
EXTENT OF DRUG ABUSE CURRENTLY AVAILABLE IN PAKISTAN,
HOWEVER, COULD LIMIT USEFULNESS OF VISIT PROPOSED REFTEL
AT PRESENT TIME, ALTHOUGH THERE ARE A NUMBER OF PSYCHIA-
TRISTS IN MAJOR PAK CITIES WITH SOME EXPERIENCE IN ADDICT
TREATMENT (SEE PARA 3L). WE THEREFORE BELIEVE THAT VISIT
IS SOMEWHAT PREMATURE AND BELIEVE THAT IT COULD WAIT
UNTIL PNCB HAS HAD MORE TIME TO CONSIDER ISSUE AND GET
STAFF INTO PLACE. WE ALSO RELUCTANT AT THIS TIME TO
DIVERT PNCB FROM WHAT WE CONSIDER TO BE MORE PRESSING
ENFORCEMENT AND ERADICATION ISSUES.

3. FOLLOWING IS AVAILABLE INFORMATION REQUESTED KEYED
TO PARA 2 REFTEL:

A) MEDICAL FACILITIES:

1) KARACHI -- JINNAH POST GRADUATE MEDICAL
CENTER, DOW MEDICAL COLLEGE, CIVIL HOSPITAL

2) LAHORE -- GOVERNMENT MENTAL HOSPITAL, MAYO
HOSPITAL PSYCHIATRIC CLINIC

3) PESHAWAR -- MENTAL HOSPITAL, COMBINED MILITARY
HOSPITAL AND MISSION HOSPITAL COULD TECHNICALLY
ACCOMMODATE CLINIC BUT IT IS UNCERTAIN WHETHER
MILITARY WOULD BE INTERESTED OR WHETHER GOP
WOULD WANT TO ATTACH CLINIC TO MISSION HOSPITAL.
KHYBER TEACHING HOSPITAL CONNECTED WITH PESHAWAR
UNIVERSITY NOW UNDER CONSTRUCTION AND CONCEIVABLY
SPACE AND FACILITIES COULD BE MADE AVAILABLE FOR CLINIC.

4) RAWALPINDI -- MILITARY HOSPITAL.

PNCB APPARENTLY ENVISAGES SETTING UP ADDICT TREAT-
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MENT CLINICS HEADED BY PSYCHIATRIST AND STAFF OF
EIGHT OR MORE MEDICAL PERSONNEL AT HOSPITALS IN
THESE CITIES. PRESUMABLY CLINICS WOULD BE RUN
IN COLLABORATION WITH HOSPITAL PSYCHIATRIC WARDS.

B) EXPERTISE. THOSE WHO HAVE RELEVANT EXPERTISE
AND SOME EXPERIENCE IN DRUG TREATMENT AREA
ARE ALMOST EXCLUSIVELY LIMITED TO PSYCHIATRISTS

AND NEURO-PSYCHIATRISTS:

1) JINNAH CENTER CONTAINS NEURO-PSYCHIATRIC DEPARTMENT WHICH HAS BEEN INVOLVED WITH SOME RESEARCH ON AND TREATMENT OF ADDICTION.

2) LAHORE MENTAL HOSPITAL AND MAYO HOSPITAL PSYCHIATRIC CLINIC: THREE PRACTICING PSYCHIATRISTS WHO HAVE SOME EXPERIENCE IN ADDICT TREATMENT ON STAFF OF BOTH HOSPITALS. ONE OF THESE REPORTEDLY HAS BEEN EXPERIMENTING WITH CHEMOTHERAPY FOR ADDICTS.

3) PESHAWAR MENTAL HOSPITAL RUN BY COMPETENT PSYCHIATRIST DOES HANDLE SOME ADDICT USERS. AT MISSION HOSPITAL, MISSIONARY PSYCHIATRIST HAS UNDERTAKEN SOME TREATMENT OF ADDICTS WITHIN SMALL PSYCHIATRIC WARD. TWO BRITISH PSYCHIATRIC SOCIAL WORKERS ARE ATTACHED TO MISSION HOSPITAL.

4) MILITARY HOSPITAL RAWALPINDI. MILITARY PSYCHIATRIST HAS BEEN TREATING PERSONS WITH DRUG ABUSE PROBLEMS IN PSYCHIATRIC WARD.

5) IN ADDITION MEDICAL SUPERINTENDENT SIR C. J. MENTAL HOSPITAL HYDERABAD, DR. HYDER ALI QAZI, IS INTERESTED IN MENTAL PROBLEMS STEMMING FROM DRUG ADDICTION, AS IS HIS WIFE, DR. NASRA HYDER, A PROFESSOR AT LIAQUAT MEDICAL COLLEGE.
C. WE HAVE OBSERVED LITTLE PROGRESS IN DEVELOPMENT OF INFORMATION ON DRUG ABUSE IN PAKISTAN SINCE LIMITED OFFICIAL USE

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TEAM VISIT. IMPETUS FOR SUCH DATA COLLECTION WILL PROBABLY HAVE TO COME FROM PNCB, WHICH HAS YET TO TACKLE QUESTION IN SYSTEMATIC WAY. SOME ESTIMATES HAVE BEEN MADE BY PUNJAB EXERCISE AND TAXATION DEPARTMENT BUT RESULTS HAVE NOT BEEN ANALYZED AND TABULATED.

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ACTION NEA-12

INFO OCT-01 ISO-00 SNM-02 L-03 AID-20 CU-04 ABF-01 OPR-02

PER-05 A-01 MED-03 DODE-00 NSC-10 HEW-08 SS-15 INR-10

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FM AMEMBASSY ISLAMABAD

TO SECSTATE WASHDC 924

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D. DISCUSSIONS DURING TEAM VISIT AND SUBSEQUENT CONVERSATIONS WITH PAK OFFICIALS AND LAYMEN SUGGEST THAT THERE IS GROWING PROBLEM OF ABUSE OF INJECTIBLE DRUGS (PETHADINE, MORPHINE, METHADRINE) AND OF HASHISH BY YOUNG PEOPLE. ABUSE OF OPIUM, LIMITED LARGELY TO OLDER ADDICTS, IS NOT BELIEVED TO BE SERIOUS OR GROWING SOCIAL PROBLEM.

E. WE KNOW OF NO SYSTEMATIC RESEARCH PROGRAM LOOKING AT OPIUM ADDICTION AND TREATMENT. HOWEVER, PSYCHIATRIST AT RAWALPINDI MILITARY HOSPITAL IS PLANNING TO PUBLISH SEVERAL CASE STUDIES OF PETHADINE ADDICTION IN NEAR FUTURE. JINNAH CENTER WAS REPORTEDLY STARTING STUDY OF LONG-TERM EFFECTS OF CHARAS (HASHISH) INTOXICATION IN EARLY 1973.

F. INGESTION IS MOST PREVALENT FORM OF OPIUM ABUSE, ALTHOUGH SMOKING ALSO OCCURS. SYNTHETIC OPIATES SUCH AS MORPHINE AND PETHADINE ARE INJECTED.

G. THERE DOES NOT APPEAR TO BE ANY FORMAL TREATMENT FOR OPIUM ADDICTS PER SE.

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H. COMMONLY ABUSED SYNTHETIC DRUGS INCLUDE PETHADINE, METHADRINE, MORPHINE, AND "ROCKETS" (AMPHETAMINE).

I. TREATMENT NORMALLY OCCURS ONLY WHEN ADDICTS WITH SOME FINANCIAL RESOURCES SEEK PSYCHIATRIC ASSISTANCE. SEVERE CASES MAY INVOLVE IN-PATIENT TREATMENT IN PSYCHIATRIC WARD OF HOSPITAL. PSYCHIATRIST AT RAWALPINDI USES FOLLOWING DETOXIFICATION PROCEDURE:

1) REDUCTION OF DOSAGE TO LEVEL AT WHICH WITHDRAWAL BECOMES PAINFUL.

2) WHEN THAT LEVEL IS REACHED USE OF SUPPORTIVE PSYCHOTHERAPY AND SEDATIVES TO ASSIST FINAL DETOXIFICATION. THIS DOCTOR BELIEVES ON BASIS OF EXPERIENCE THAT PETHADINE ADDICTS CAN BE DETOXIFIED WITH MORPHINE WITHOUT DEVELOPING MORPHINE DEPENDENCE.

AT PESHAWAR COMMITTEE WAS RECENTLY SET UP UNDER AUSPICES OF PAK RED CROSS TO DEVELOP PROGRAM FOR TREATMENT AND REHABILITATION OF FOREIGN HIPPIE-TYPE ADDICTS. COMMITTEE EXPECTED TO CONTRIBUTE SOME MONEY TO WORK NOW GOING ON AT MENTAL AND MISSION HOSPITAL.

J. PNCB CHAIRMAN HAS RECENTLY BEEN DISCUSSING WITH MISSION REPS POSSIBLE APPROACHES TO PUBLIC EDUCATION PROGRAMS ON DRUG ABUSE BUT NO PROGRAMS ARE YET UNDERWAY.;

(. NO.

L. COL. (DR.) M. SHAIB, PSYCHIATRIST, MILITARY HOSPITAL, RAWALPINDI.

DR. ZAKI HAZZAN, NEUROPSYCHIATRIST, NEUROPSYCHIATRY DEPARTMENT, JINNAH POST GRADUATE CENTER, KARACHI.
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DR. HAROON AHMED, JINNAH POSTGRADUATE CENTER.

DR. MOHAMMAD RASHID CHOWDRY, PSYCHIATRIST, GOVERNMENT HOSPITAL AND MAYO HOSPITAL, LAHORE.

DR. SAJJAD HAIDER, PSYCHIATRIST, GOVERNMENT MENTAL HOSPITAL AND MAYO HOSPITAL, LAHORE.

DR. ABDUL AZIZ, PSYCHIATRIST, GOVERNMENT
MENTAL HOSPITAL AND MAYO HOSPITAL, LAHORE.

DR. HYDER ALI QAZI, MEDICAL SUPERINTENDENT,
SIR CM. J. MENTAL HOSPITAL, HYDERABAD,

DR. MOHAMMAD SHAFIQ, PSYCHIATRIST, PESHAWAR
MENTAL HOSPITAL.

DR. HAMID ALI, GENERAL PSYCHIATRIST; PESHAWAR.
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